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ABSTRACT

Conducted by New York State's Legislative Commission on Expenditure Review (LCER), this program audit reviews the implementation of the 1980 legislative mandate that all new public school entrants be screened for handicapping conditions or giftedness and that children scoring below specified scores on third and eighth grade statewide standardized tests be screened for handicapping conditions. LCER found that the State Education Department (SED) had conducted no systematic evaluation of district compliance. Following initial interviews, a cross section of 20 school districts, including six in New York City, was selected for field visits. Findings indicated widespread compliance with the mandate in the 20 school districts. Chapter I of this report provides background information about the screening program and describes the intent of Chapter 53 of the Laws of 1980, Section 3208(6) of the Education Law. Chapter II reviews the programatic implementation of screening by districts, including the selection of instruments, screening administration with particular attention to screening for non-English speaking students, referral procedures, and the use of screening results for subsequent program provision. The mandate's impact on districts' policies also is analyzed. Chapter III analyzes the sample districts' expenditures for screening for school year 1983-84. SED's monitoring of the screening program and expenditures also is described and assessed. Related materials are appended. (RH)

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Legislative Commission On Expenditure Review

Screening of Public School Children

Program Audit
April 1985

SUMMARY AND CONCLUSIONS

Early screening of young children to detect possible handicapping conditions has been emphasized under federal legislation to assure early referral to appropriate treatment services to ameliorate incipient handicapping conditions. Screening instruments are preliminary devices to detect for particular abnormalities in a population, and are usually followed by more exhaustive diagnostic tests to confirm or reject the presence of the suspected condition.

Legislative Intent

In 1980, the Legislature, concerned about the extent of screening of new entrants to public schools, enacted a law requiring that all new entrants and those scoring below specified scores on the third grade Pupil Evaluation Program (PEP) tests and the eighth grade Preliminary Competency Tests (PCT) be screened using a physical examination, appropriate immunizations, and a language development assessment.

To finance the program, the Legislature originally gave districts $8 per student for their adjusted average kindergarten to grade three attendance. In 1982, the formula base was widened to kindergarten to grade six. Effective only for the 1982-83 and 1983-84 school years, State aid dollars could only be spent on the screening of children in kindergarten to sixth grade. That restriction on expenditures was eliminated effective with the 1984-85 school year.

The State Education Department (SED) promulgated regulations detailing general requirements for the timing and the procedures to implement the mandate. SED also developed and updated a manual on screening for school districts. However, SED otherwise has left mandate implementation to the initiative of school districts. SED's paper review of district screening plans was its only regulatory oversight mechanism. No systematic evaluation has been conducted by SED of the screening program.

Methodology

LCER staff selected a geographic cross section of 20 districts, including six in New York City, to review the implementation of the screening mandate. In each district, records of a sample of 1983-84 kindergarten entrants and low scorers on the PEP test and the PCTs were reviewed to determine the completeness and timeliness of the children's screening. Interviews were conducted with district staff, and each district completed a data request.

Local District Implementation

Though there was variation in the means to implement the statute, LCER staff found high levels of compliance with the screening mandate.

Kindergarten Screening

Almost all of the kindergarten records reviewed had evidence of immunizations

(99.8 percent) and a health examination (96.9 percent). Individual evidence of cognitive (88.3 percent), motor (87.4 percent) and language (91.1 percent) development screenings also was found in most cases. Using indirect evidence where individual screening records were not available, LCER staff found no evidence of cognitive (3.1 percent), motor (4.1 percent) and language (3.6 percent) screenings in a few cases.

Outside New York City. All sample districts outside New York City had a screening program prior to the screening mandate. One-half of the districts, however, overhauled their existing procedures because of the screening statute. Screening of non-English speaking students in their native language as required by SED regulations was a minor or nonexistent issue outside New York City and was generally handled by informal arrangements on a case-by-case basis.

New York City. Prior to the screening mandate, there was no formalized systematic screening of kindergarten entrants in four of the six community school districts visited. Screening currently is conducted by screening teams of retired and/or substitute teachers from early October to mid-November. In the 1981-82 school year all districts used the DIAL, a commercially available instrument, but almost all districts switched to the Brigance, another commerical test, in the next school year. Screening administrators felt that the Brigance was less time consuming and cumbersome to administer but as valid and reliable as the DIAL.

Screening of non-English speaking students was a major issue in the City. In the 1983-84 school year, New York City schools conducted non-English screening in 32 languages. The New York City Board of Education developed lists of language consultants as translators and provided translations of the screening instruments in five languages to assist districts. However, five districts visited had serious problems coordinating the consultant's and child's schedules and were concerned about the knowledge of the consultants about screening and interacting with kindergarten children. The multitude of screening languages resulted in some delays; 1,586 kindergarten children (18.1 percent of kindergarten children screened in foreign languages) were awaiting the availability of language consultants for screening as of January 1984.

Use of Screening Results. Most districts outside New York City used the judgment of its professional staff, sometimes combined with cutoff scores on tests, to make referral decisions. New York City used cutoff scores normed for the City by the test publishers. Chart 1 (see p. 8) reveals that New York City districts in LCER's sample referred a greater proportion of kindergarten students as possibly gifted and needing further observation than sample districts outside the City. This stems from the City's efforts to develop a large pool of possibly gifted students for consideration for gifted program admission. It also is a function of the use of numerical cutoffs by the City unlike other districts which relied largely on professional judgment for designating children's strengths and weaknesses.

Almost half of the sample districts had a specific kindergarten program for children with one or more developmental delays but not requiring a referral to the Committee on the Handicapped. These children without special attention may need referral to a special education program in later years according to district staff interviewed.

Third and Eighth Grade Screening

In LCER's sample, only 7.6 percent of the third grade students and 4.7 percent of the eighth grade students needed to be screened because of low scores on the PEP test and the PCTs. The proportion requiring screening was higher in New York City for both tests. However, about two-fifths of the districts outside New York City refer all PEP or PCT failures to remediation without the interim screening required by the man-

date. New York City teachers administer an observational checklist and give the New York City reading test to these children.

The lack of interim screening for some of these PEP and PCT failures is mitigated since SED guidelines require that all children scoring below the Statewide Reference Points on the PEP and PCTs, a score higher than the screening cutoff, shall receive remedial services. LCER staff found documentation of appropriate remedial services for 85 percent of the PEP and PCT failures in its sample.

Finances and SED Role

Finances

State aid for screening rose from $5.2 million for the 1980-81 school year to $9.3 million in the 1983-84 school year, based on the widening of the formula base from kindergarten to grade three to kindergarten to grade six. Total aid has amounted to almost $34 million.

For the 1983-84 school year, State aid covered 86 percent of district screening expenditures from kindergarten to grade 12 and 97 percent from kindergarten to grade six in LCER's sample. Despite the 1982 statute requiring that kindergarten to grade six district screening expenditures at least equal State aid received, four districts reported to LCER lower kindergarten to grade six expenditures than State aid received.

SED Financial Role

For the 1982-83 and 1983-84 school years, SED required districts to submit statements to determine if each district's kindergarten to grade six expenditures exceeded State aid. Little written guidance was given districts in completing these reports. As a result, there was wide variation in several districts in the 1983-84 screening expenditures reported to SED and LCER.

SED in November 1984 indicated to school districts that screening aid in excess of 1982-83 and 1983-84 kindergarten to grade six screening expenditures would be recovered beginning June 30, 1985. SED gave districts until December 31, 1984 to revise its figures.

New York City revised its 1982-83 and 1983-84 school year screening expenditure reports by shifting $1.5 million from grades seven to twelve to kindergarten to grade six. This shift justified New York City's receipt of $1.2 million of screening aid. SED staff indicated to LCER staff that it intended to accept the New York City reports as submitted.

SED Program Role

Outside of the initial school year of implementing the mandate, districts reported little or no contact with SED units pertaining to the mandate. Districts sometimes reviewed the files of the Special Education Resource and Training Centers around the State to investigate possible screening instruments for use. Regional Associates of the Office of Education of Children with Handicapping Conditions had assessed several LCER sample district screening programs by reviewing only the district plan for screening.

Most districts felt that it would be helpful for SED to serve as an information clearinghouse for district screening tests and to review the validity and reliability of district developed and commercially available screening devices. Almost all districts opposed SED's mandating the screening instrument(s) which must be used.

Conclusions

The screening mandate resulted in the formalization of district procedures outside New York City and the beginning of formal screening in New York City. The chief substantive impact of the mandate has been the systematic identification of kinder-

garten entrants who have developmental delays not serious enough to warrant current referral to a special education program. Such identification permits district staff to give the child the attention and services needed to reduce the possibility of a referral to a program for the handicapped in a later grade.

Staff Recommendations and Findings for Comment

Chapter 58 of the Laws of 1980 requires heads of audited agencies to report within 180 days of receipt of the final program audit to the Chairman of the Legislative Commission on Expenditure Review and the Chairmen and the Ranking Minority Members of the Senate Finance Committee and the Assembly Ways and Means Committee on what steps have been taken in response to findings and conclusions and where no steps were taken, the reason why.

Recommendations

1. SED should consider developing an inventory of screening instruments used by various school districts. (See p. 18.)

2. SED should develop detailed guidelines to assist districts in accurately reporting their screening expenditures. (See pp. 16-17.)

3. SED should audit the New York City revised screening expenditure reports for the 1982-83 and 1983-84 school years to assure that State aid dollars were spent appropriately. (See p. 17.)

Findings

1. Two-fifths of the sample districts outside New York City automatically referred low PEP and PCT scorers to remedial programs rather than screening them as required for possible handicapping conditions. (See p. 11.)

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FOREWORD

The Legislative Commission on Expenditure Review (LCER) was established by Chapter 176 of the Laws of 1969 as a permanent legislative agency for among other duties, "the purpose of determining whether any such department or agency has efficiently and effectively expended funds appropriated by the Legislature for specific programs and whether such departments or agencies have failed to fulfill the legislative intent, purpose and authorization." This program audit, Screening of Public School Children, is the one hundred twenty-ninth report.

The audit reviews the implementation of the 1980 legislative mandate that all new public school entrants and children scoring below specified scores on third and eighth grade statewide standardized tests be screened to detect the possible presence of handicapping conditions or possible giftedness.

The audit found widespread compliance with the mandate in the 20 school districts visited, including six in New York City. After promulgating regulations and issuing a screening handbook, the State Education Department's (SED) program and fiscal oversight has been limited essentially to technical assistance. The chief impact of screening has been the systematic identification of kindergarten entrants with developmental delays not serious enough to warrant current referral to a special education program. Such identification permits district staff to give the child the attention and services needed to reduce the possibility of a referral to a program for the handicapped in a later grade.

In accordance with Commission policy, the report focuses on factual analysis and evaluation. The recommendations and program proposals that are included in this report are made by LCER staff for the consideration of the Commission.

Appreciation is expressed to SED staff, the staffs of the 20 school districts visited and New York City Board of Education personnel for their full cooperation in conducting this review. SED's response is included as Appendix D.

The audit was conducted by David Rowell, Chairman, John Coleman and Edward Bogdan. James Haag handled layout and production. Word processing and graphics were provided by Dawn Hewitt. Overall supervision was the responsibility of the Director.

The Commission is interested in hearing from the readers of its audits. Any comments or suggestions should be sent to the Director at the address listed on the inside front cover of this audit.

The law mandates that the Chairmanship of the Legislative Commission on Expenditure Review alternate in successive years between the Chairman, Senate Finance Committee and the Chairman, Assembly Ways and Means Committee. Senator John J. Marchi is Chairman for 1985 and Assemblyman Arthur J. Kremer is Vice-Chairman.

April 12, 1985

Bernard P. Geizer
Director

I PROGRAM BACKGROUND AND LEGISLATIVE INTENT

A recent book analyzed the appropriateness and feasibility of the detection of developmental problems in young children through the administration of a screening test. Such test instruments are preliminary devices to detect particular abnormalities in a population and are followed by more exhaustive diagnostic tests to confirm or reject the presence of the suspected condition.[1]

To select an appropriate screening instrument, the authors outlined several criteria:[2]

1. It must be acceptable to the children, parents, and professionals involved, and be simple to administer.

2. The costs of administration must be justified by the subsequent savings in early detection of the condition(s) being tested for.

3. The test must be reliable (detect the existing condition in multiple test administrations) and valid (contain items which will detect the condition being targeted).

Early screening of preschool children to detect possible handicapping conditions has been emphasized under the federal Education of All Handicapped Children Act of 1975 (Public Law 94-142) and federal "child-find" grants. The aim of such screening is to assure early referral of children to appropriate treatment services to ameliorate their handicapping conditions.

Legislative Intent

Program Operation

Screening of children prior to entrance into public schools for the presence of physical handicaps or communicable diseases has been a traditional requirement of New York State public schools. A child must receive appropriate immunizations before entering school and also must receive a health examination or a health certificate.[3] In 1980, concerned about the extent of public school screening of new pupils for possible handicapping conditions and giftedness, the Legislature enacted Chapter 53 of the Laws of 1980, Section 3208(6) of the Education Law, requiring that all new public school entrants and all pupils scoring below level two on the third grade Pupil Evaluation Program (PEP) reading or mathematics tests or comparable scores on the Regents Preliminary Competency Tests (PCT) be screened using a physical examination, appropriate immunizations, and a language development assessment.

State Education Department (SED) regulations defined the last (and essentially new) screening requirement to include "a determination of receptive and expressive language development, motor development, articulation skills and cognitive development."[4] SED, for purposes of the statute, defined screening as "a preliminary method of distinguishing from the general population those pupils who may possibly have a handicapping condition or those who may possibly be gifted."[5] The regulations also required that each district develop a plan to conduct screening as subsequently outlined in a SED handbook.[6] The screening for new entrants shall be conducted by appropriately

qualified persons and be completed by December 1st.[7] Non-English speaking students shall be screened in their native language. Based upon the screening tests, school personnel shall prepare a written report. Appropriate referrals to the School District Committee on the Handicapped (COH) for children with suspected handicapping conditions and to the Superintendent for possibly gifted children shall be within 15 calendar days after the screening is completed.[8] As discussed in Chapter III, SED largely has left mandate implementation to the initiative of each school district.

The screening mandate requiring an early review of each child's skills supplements other New York State programs for early identification and treatment of handicapped children. New York State school districts under Section 3241 of the Education Law are required to conduct an annual school census through which they may identify resident handicapped children. Under Section 4402(1) (a) of the Education Law, the COHs are responsible for maintaining a register of handicapped children eligible to attend district schools during the next school year. Handicapped children under five years old may be treated through a program ordered by the Family Court under Section 236 of the Family Court Act. Thus many handicapped children already are identified prior to the kindergarten screening required under Chapter 53.

Finances

The Legislature enacted a formula initially giving districts $8 per student for their adjusted average annual daily kindergarten to grade three attendance to finance the purchase, administration and analysis of the screenings instruments.[9] As of July 1, 1981, the formula base was widened to kindergarten to grade six.[10] Chapter 419 of the Laws of 1982 revised the formula by specifying that the State aid dollars could only be expended for "pupils in such grades" referring to the kindergarten to sixth grade formula base.[11] That restriction on expenditure of State aid was effective for school years 1982-83 and 1983-84. The 1982 amendment was repealed effective with the 1984-85 school year, and State aid monies can now be used to pay for screening all students from kindergarten to grade 12.[12]

Scope and Methodology

Four issues are covered in this audit:

--Are the children being screened?

--How are the districts carrying out the mandate?

--How much does the screening cost?

--To what extent is SED monitoring and providing assistance to school districts to comply with the screening mandate?

To answer these questions, LCER staff interviewed appropriate SED staff and requested necessary documentation to assess the extent of SED technical assistance and monitoring of the screening requirement. LCER staff found that SED staff had conducted no systematic evaluation of district compliance with the screening mandate. Following initial interviews, a cross section of 20 school districts including six in New York City was selected for field visits. The sample is geographically representative and reflects the

range of school districts, but can not be used to make statistically valid inferences statewide. Details on sample district selection are contained in Appendix B.

During each field visit, LCER staff interviewed appropriate district staff on the operation and administration of their screening program, their contact with SED on screening, and their opinion of the appropriate SED role in implementing the mandate. A sample of the records of 1983-84 school year kindergarten entrants and low scorers on the May 1983 third grade PEP reading and mathematics tests and the most recent eighth grade PCTs in reading and writing was reviewed to document the completion and results of screening. Each district also completed a data request on its screening program.

Chapter II reviews the programmatic implementation of screening by districts including the selection of instruments, screening administration particularly for non-English speaking students, referral procedures, and the use of screening results for subsequent program provision. The mandate's impact on districts' policies also is analyzed.

Chapter III analyzes the sample districts' expenditures for screening for school year 1983-84. SED's monitoring of the screening program and expenditures also is described and assessed.

Chapter Summary

● Screening is a preliminary testing method to detect the possible existence of abnormal conditions in a population. For preschool children, federal legislation promoted the growth of screening to assure early detection and treatment of handicapping conditions.

● In 1980, the Legislature required that all new public school entrants be screened for possible handicapping conditions or giftedness. Students who score below specified scores on the Pupil Evaluation Program third grade reading and mathematics tests and the eighth grade Preliminary Competency Tests in reading and writing also must be screened.

II DISTRICT ADMINISTRATION OF SCREENING

This chapter reviews the administration and operation of the screening program in LCER's 14 non-City sample districts and six sample districts in New York City including district policies and program administration. The analysis discusses the development and implementation of district screening procedures, the interpretation and use of screening results, and the impact of the mandate.

Kindergarten Screening

Since the enactment of the mandate, districts have varied in how they have screened new kindergarten entrants. Prior to the mandate all sample districts outside New York City had screening programs. Port Washington used a locally devised instrument for screening developed many years before the mandate. In Wynantskill, a small rural district outside Albany, local college students supervised by district professional staff administered a commercially available instrument to incoming kindergarten youngsters. For half of the sample districts, the mandate resulted in an overhaul of their existing screening procedures. Schenectady and Syracuse formed screening committees to review and revise their procedures to make them uniform. Several other districts changed the instruments used prior to the mandate being dissatisfied with how those devices had met their needs.

In contrast, four of the six New York City district screening administrators interviewed indicated that systematic kindergarten screening usually had not been done in district schools. Whatever was being done was unique to particular schools and classes. Formalized screening procedures in New York City thus began principally after the passage of the screening statute.

District Administration

Screening Completion. LCER staff reviewed the files of 420 kindergarten entrants during the 1983-84 school year in the sample districts to determine if each child had an up-to-date immunization record, a health examination or a health certificate and a screening of his or her language, motor, and cognitive development as required by the mandate. LCER staff also determined whether children entering school prior to November 15th were screened by December 1st as required under SED regulations.

Almost all of the kindergarten students had evidence of the receipt of appropriate immunizations (99.8 percent) and a health examination or a health certificate (96.9 percent). High compliance levels also were found for screening of language (91.1 percent), motor (87.4 percent) and cognitive (88.3 percent) development. Districts completed their kindergarten screening by December 1st in 88.3 percent of the cases.

For most pupils for whom no direct evidence was available for completion of screening, LCER staff was provided indirect evidence of screening completion such as scheduled appointments and subsequent school year screening programs. Taking this into account, LCER staff found no evidence of screening completion in the following proportion of cases: language (3.6 percent), motor (4.1 percent), and cognitive (3.1 percent) development. These cases primarily came from one district where one sample school did not screen children as required by district policy. Thus there was a high

level of compliance with the screening mandate for kindergarten entrants in LCER's sample.

Timing and Process. Outside New York City, most sample districts completed some or all of their kindergarten screening in the spring before subsequent school entrance in the fall. Five districts split their screening between the spring and fall. The screening usually is conducted by specialists such as the physical education teacher, the nurse/teacher and the school psychologist. In some districts, kindergarten teachers also are involved.

New York City conducts kindergarten screening from early October to mid-November. During 1980-81, the first school year following the mandate, no formalized screening was conducted because New York City was negotiating with SED on the appropriate instruments to be used. In the 1981-82 school year, kindergarten teachers conducted the screening. Because of concerns about the uniformity of screening administration and the extensive time required for teachers to administer the tests, the City switched to screening teams. The district screening administrator hires a team consisting of usually retired and/or substitute teachers who are paid on a per diem basis to conduct the screening.

Districts have either one person administer the entire instrument to the child, or the child goes to several stations where different people administer sections of the screening device. Because of concerns about parents prompting their children, parents generally do not accompany the child during the screening. All districts, however, notify parents about the screening procedures by sending them a letter, holding orientation sessions and/or discussing the process with them on the child's screening day.

Instruments Used. Most districts including New York City used one or more commercially available screening instruments, sometimes selecting portions of several commercial tests, to screen kindergarten entrants. Four sample districts relied partly or entirely on district developed tests though those instruments may utilize items drawn from commercial tests. Slightly less than half of the districts outside New York City changed the device or devices used since the screening mandate took effect. Districts changed instruments because their current test did not meet their needs in identifying pupils' problems or strengths and/or the instruments were too difficult or expensive to administer.

The latter concern was foremost in the reasoning of the five City districts visited which switched from the DIAL to the Brigance, two commercially available instruments. The New York City Board of Education allows districts to use either instrument for kindergarten screening. However, after the 1981-82 school year, all City districts but two changed to the Brigance viewing it as less cumbersome and less costly to administer than the DIAL but seen as valid and reliable in its results. Only one City district currently uses the DIAL for kindergarten screening.

Non-English Speaking Pupils. According to SED regulations, students are to be screened in their native language. For most districts outside New York City, this has been a minor or nonexistent issue. Districts which had a small number of non-English speaking pupils frequently used personnel of the Board of Cooperative Educational Services (BOCES) or other outside staff to provide translation services. In two non-New York City districts, staff indicated that screening was delayed for a few pupils because of a lack of available translators.

In New York City, screening of non-English speaking students was a significant issue for all districts visited. The New York City Board of Education plan for conducting screening encourages districts to use their own resources to screen these students. The plan also states that district screening administrators shall have available translations of the instruments used in the major non-English languages of Spanish, Haitian-Creole, Italian, Greek and Chinese. To assist districts in screening children, the Board of Education maintains a list of language consultants (who are usually not teachers) to translate the instrument for the teacher testing the child.

The five districts visited which had used the consultants had serious problems with their availability and performance. Several districts reported difficulties in getting consultants to the boroughs outside Manhattan or coordinating the consultant's and child's schedules. Screening administrators also expressed concerns about the consultants' familiarity with screening or the children being screened. Partly because of these concerns, all but one district visited currently has screening team members who are at least bilingual. Districts also used other district teachers or members of community organizations to provide translation services or administered a nonlanguage based instrument to determine the child's developmental condition.

Using these resources, two sample districts reported some delays in screening children in their native language. A third district, which had no bilingual screening team members in the 1984-85 school year, has had serious problems in completing the screening on time. For the 1984-85 school year, that district had to screen 112 kindergarten and first grade students in 23 languages.

New York City Board of Education staff confirmed to LCER staff that maintaining an adequate list of language consultants to translate for the large number of screening languages is a difficult problem. In the 1983-84 school year, New York City schools screened children in 32 languages. Scheduling of language consultants was made the responsibility of district screening administrators beginning in the 1982-83 school year. Coordination of child and consultant schedules, however, is a continuing problem. Furthermore, concepts in the screening instrument such as "skip" cannot always be readily translated into other languages which could endanger the validity of the screening results. Because of the coordination problems, 1,568 kindergarten children City-wide (18.1 percent of those kindergarten children needing screening in non-English languages) were awaiting the services of language consultants as of January 1984.

Interpretation and Use of Screening Results

Screening results are used to determine whether the child needs to be formally referred as possibly handicapped or possibly gifted, informally observed by the kindergarten teacher to check on possible developmental problems and/or referred to a special program for giftedness or developmental delays. Districts outside New York City tended to rely on the professional judgment of district staff (usually the screening team and/or the school psychologist and principal) sometimes combined with cutoff scores on the instrument(s) utilized to make referral decisions. In New York City, formal cutoff scores normed for pupils have been established for the two instruments used for kindergarten screening for four levels of performance:

--Performs above expectations (possibly gifted),

--No further assessment needed,

--Further observation indicated,

--Referral to the School Based Support Team (possibly handicapped).

Referrals for Giftedness. The ability of screening instruments to identify kindergarten children as possibly gifted was questioned by staff in most districts in LCER's field visits. They indicated that such instruments are not adequate by themselves and must be used in conjunction with other measures such as teacher observation/recommendation, intelligence tests and other standardized instruments to determine possible giftedness. These multiple criteria are generally used by sample districts for admission to their gifted programs. Four New York City districts were the only schools visited where separate gifted programs began at the kindergarten level. Outside New York City, most district gifted programs commenced by the third grade. Thus kindergarten screening for possible giftedness usually does not lead to a program referral but alerts districts for possible program needs at a later grade.

Developmentally Delayed Programs. Eight sample districts have a special kindergarten program for developmentally delayed children usually based upon the screening results. These districts place children into the programs without a formal referral through the School District Committee on the Handicapped (COH). The programs thus are geared for children with developmental problems which left unaddressed might later lead to placement in a program for handicapped children. Four of these programs began after the inception of the screening mandate though only two districts cited the mandate as partial explanation for the program's inception.

Screening Results. Chart 1 delineates the kindergarten screening results found by LCER staff in its file reviews in sample districts. The chart reflects only referrals or comments for teacher observation documented in the school records. District records varied in the extent of summary comments about the screening placed in the child's file .

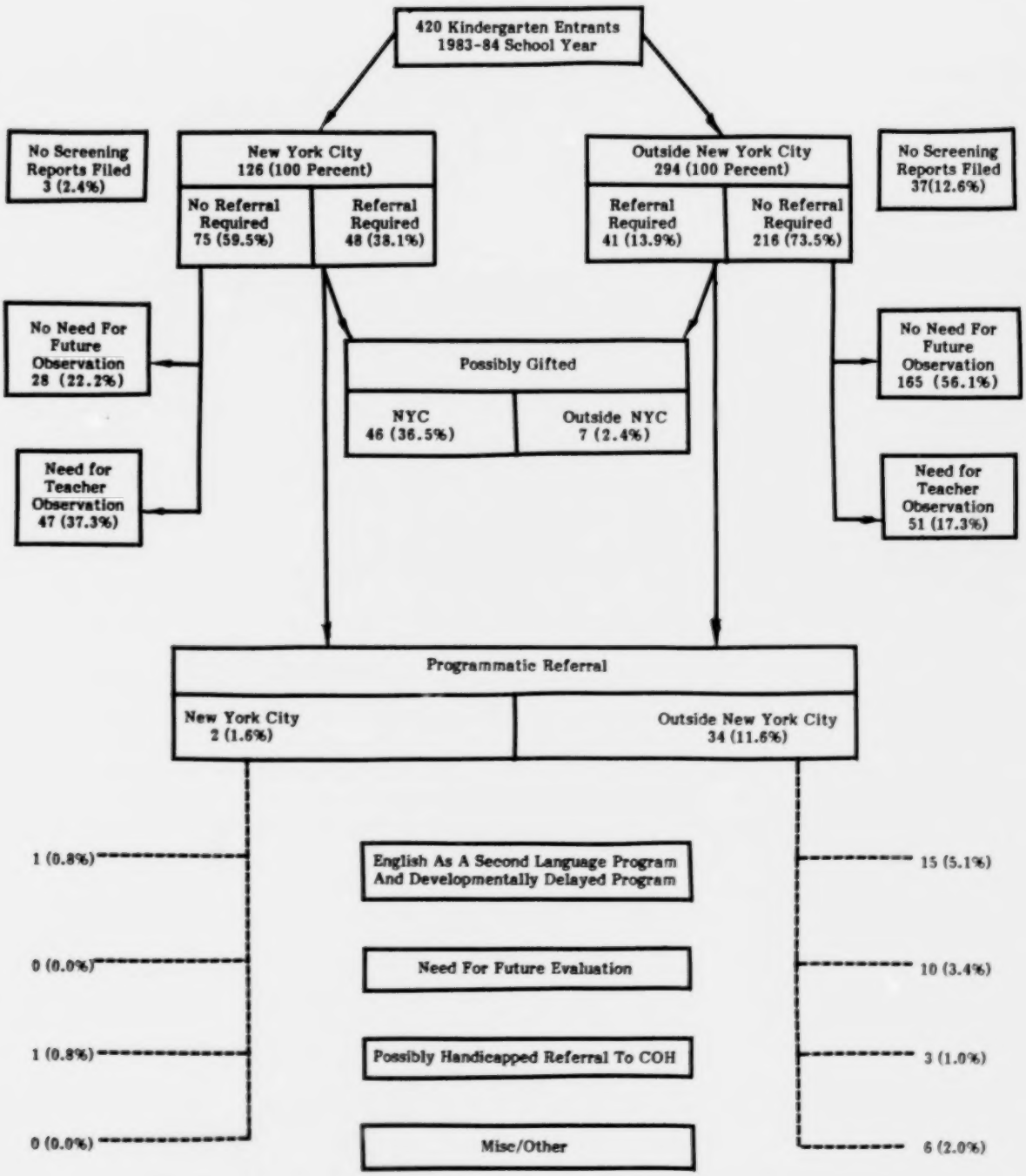
The comparison between New York City and outside the City requires several comments. The City had a substantially higher proportion of possibly gifted children (36.5 percent compared to 2.4 percent) and children in need of further observation (37.3 percent compared to 17.3 percent) than the sample reviewed outside the City. Conversely, pupils outside New York City had a higher proportion of programmatic referrals.

New York City, unlike most other districts, used numerical cutoffs as the sole basis for referral. Districts outside the City, relying principally on professional judgment, were less likely to categorize the child as possibly gifted or needing observation because they did not want to label the child prematurely. City schools used cutoff scores rather than individual review of test results because of the large populations which must be screened in a limited time period. New York City Board of Education staff indicated that the change from the DIAL to the Brigance by almost all districts was the major reason for the rise in the proportion of possibly gifted children. The norms on the Brigance were designed to identify a larger pool of possibly gifted students for subsequent refinement by district criteria for admission to gifted programs.

Recording of written comments including program referrals was more prevalent outside New York City. Since the New York City screening was done by district rather than school level staff, subsequent program referrals (other than for possibly gifted or handicapped children) usually were not recorded on the screening instrument and probably were not linked directly to the screening results.

Chart 1

Results of Kindergarten Screening
LCER Sample


420 Kindergarten Entrants
1983-84 School Year
No Screening Reports Filed 3 (2.4%)
New York City 126 (100 Percent)
No Referral Required 75 (59.5%)
Referral Required 48 (38.1%)
Outside New York City 294 (100 Percent)
Referral Required 41 (13.9%)
No Referral Required 216 (73.5%)
No Screening Reports Filed 37(12.6%)
No Need For Future Observation 28 (22.2%)
Need for Teacher Observation 47 (37.3%)
Possibly Gifted
NYC 46 (36.5%)
Outside NYC 7 (2.4%)
No Need For Future Observation 165 (56.1%)
Need for Teacher Observation 51 (17.3%)
Programmatic Referral
New York City 2 (1.6%)
Outside New York City 34 (11.6%)
1 (0.8%)
English As A Second Language Program And Developmentally Delayed Program
15 (5.1%)
0 (0.0%)
Need For Future Evaluation
10 (3.4%)
1 (0.8%)
Possibly Handicapped Referral To COH
3 (1.0%)
0 (0.0%)
Misc/Other
6 (2.0%)

Source: LCER review of kindergarten screening results, October and November 1984.

The screening identified a very small proportion of children as possibly handicapped (less than one percent). This partly may be attributed to prior identification of many of these children through Family Court Order programs for handicapped children and school district censuses of preschool children. The principal utility of the screening was to identify language, motor, and cognitive weaknesses in 23.3 percent of the sample. These children can receive special attention in their kindergarten classes to assure that their developmental delays do not become pronounced and impede their future achievement.

Appendix C presents the data in Chart 1 by each sample school district. The district level data reinforces the patterns of City and non-City school districts discussed above.

LCER staff also requested districts to provide information on the number of all children screened (kindergarten, other new entrants and low scorers on the third grade and eighth grade standardized tests) who were referred as possibly gifted or possibly handicapped from school years 1980-81 to 1983-84. As Table 1 indicates, the proportion of the New York City children identified as possibly gifted jumped from 6.6 percent in 1981-82 to 21.7 percent in 1983-84 while outside the City the percent rose slightly from 5.9 percent in 1980-81 to 6.7 percent in 1983-84. As previously discussed, the City's change in screening instruments was the major reason for the rise. In contrast, the proportion of children identified as possibly handicapped dropped in New York City from 6.5 percent to 1.9 percent since 1981-82. Board of Education staff attributed the decline to the change in screening instruments claiming that the DIAL referred too many children as possibly handicapped who were more likely just developmentally delayed. Those identified outside the City as possibly handicapped have declined slightly from 7.5 percent to 5.5 percent since 1980-81.

Screening Information. Procedures for notifying parents of screening results varied among the sample districts. Almost three-quarters of the districts send all parents a letter and/or hold a conference to discuss the results. Most remaining districts will notify parents only if the child is possibly gifted or has a possible handicapping condition or other significant developmental problem.

Third and Eighth Grade Screening

In addition to kindergarten screening, Section 3208(6) of the Education Law requires that all students scoring below level two on the third grade Pupil Evaluation Program (PEP) tests in reading or mathematics and all students who obtain a comparable percentile score on the Regents Preliminary Competency Tests (PCT) be screened to determine whether these students may be handicapped. Specific cutoff scores (below which require district screening) are established by SED. SED directives require school administrators to provide remediation to all students falling below the Statewide Reference Point on any of the PEP and PCT tests. The current SED cutoff scores for screening are far below the Statewide Reference Points for both the PEP and PCT as shown below:

	PEP Test		PCT	
	Reading	Math	Reading	Writing
Statewide Reference Point	29	34	48	65
Screening Cutoff	16	22	34	50

Table 1

Percent Referred Based Upon Screening[g]
LCER Sample Districts

	School Year							
	1980-81		1981-82		1982-83		1983-84	
	Possibly Handicapped	Possibly Gifted	Possibly Handicapped	Possibly Gifted	Possibly Handicapped	Possibly Gifted	Possibly Handicapped	Possibly Gifted
New York City	[a]	[a]	6.5	6.6	2.6	16.3	1.9	21.7
Number Screened	—	—	103,396	103,396	100,070	100,070	122,103	122,103
Outside New York City	7.5[b]	5.9[c]	5.4[e]	7.0[d]	8.7[f]	7.9[c]	5.5[f]	6.7[d]
Number Screened	3,632	3,311	5,193	5,879	5,787	6,886	6,564	6,862

[a] No formal program.
[b] Data from 6 districts.
[c] Data from 8 districts.
[d] Data from 9 districts.
[e] Data from 10 districts.
[f] Data from 11 districts.
[g] Includes screening of new entrants and low scorers on PEP and PCT tests under Chapter 53.

Source: LCER data request to sample school districts, July 1984.

Table 2 reveals that only 7.6 percent of third graders and 4.7 percent of eighth graders taking the PEP and PCT in LCER's sample scored below the cutoff and had to be screened. For both tests, the proportion subject to screening was higher in New York City.

About two-fifths of the school districts outside of the City do not have any formal screening procedures for PEP or PCT failures, but rather provide for an automatic referral to remediation for any student scoring below the Statewide Reference Point on the respective tests. SED staff stated that remedial teachers may be conducting screenings as part of their remedial programs. In New York City an observational checklist is completed by the student's teacher. This checklist, in combination with the New York City Reading Test, (administered annually in the Spring) serves as the basis for decisions on appropriate referrals.

With few exceptions, LCER staff found that districts had established remedial programs to address the needs of students scoring poorly on the PEP test and the PCTs. The particular remediation form varied by district and included inclass remediation, tutorial efforts and "pullout" programs providing services through resource rooms. The exceptions were one district that had not established a specific program to serve students who needed remediation in writing and another district that did not have remediation in mathematics in one of the two schools visited by LCER staff.

In LCER's PEP and PCT sample, approximately 85 percent of the students failing either the PEP or PCT received appropriate remedial services. While about one-fourth of the sampled students were under COH supervision prior to taking the PEP or PCT, few were referred to the COH based on their low scores.

In a few cases students were not receiving remedial services because either (a) district personnel felt the PEP/PCT scores did not accurately represent the child's true abilities or (b) no remedial programs existed to address these deficiencies.

In sum, the impact of the screening mandate for students failing the PEP test and PCTs has been minimal. Few students fall below the screening cutoff scores and most are automatically referred for remedial services for falling below the Statewide Reference Points. However, this screening requirement does provide an extra check to assure that no child's possible handicapping condition may be overlooked and that remedial programs will reflect the child's individual needs.

Impact of Mandate

Districts were asked to comment on the impact of the screening mandate. Districts first felt that the screening process had become much more formalized. While screening generally was taking place prior to the mandate outside New York City, the screening process was largely informal, not standardized among schools within the same district. This impact was summarized by a school district superintendent who stated that:

> ...since the 1980-81 school year screening has evolved into a specific and procedurally more exact activity.... The informal procedures employed earlier have become formal and more precise in their execution.

The mandate also focused attention on the needs of students. Students are systematically being screened for problems which can be addressed at an early stage in

Table 2

Children Scoring Below Screening Mandate Scores
in LCER Sample Schools

	Number of Districts	PEP Test[a]			PCT[c]		
		Enrollment[b]	Low Scorers[d]	Percentage	Enrollment[b]	Low Scorers[d]	Percentage
New York City	6	1,163	139	12.0	1,722	143	8.3
Outside New York City	14	1,649	76	4.6	3,724	113	3.0
Total	20	2,812	215	7.6	5,446	256	4.7

[a]Pupil Evaluation Program tests for reading and mathematics administered to third grade students in May 1983.
[b]Enrollment of students in sample schools taking test.
[c]The most recently administered Preliminary Competency Tests in Reading and Writing.
[d]Children scoring below level specified by screening statute as further defined by SED regulations and directives.

Source: LCER staff review of sample district files, October and November 1984.

the child's educational development. Thus, the screening will highlight developmental weaknesses where a child may need remediation by providing a broad assessment of the child's potential.

Finally, besides the identification of a kindergarten student's strengths and weaknesses, the screening mandate linked into already existing or newly created programs for developmentally delayed kindergarten pupils in eight sample districts discussed earlier. The kindergarten screening results are used to place children into these programs. Early remediation of these developmental delays is intended to forestall later referrals to special education programs.

Chapter Summary

- All sample districts outside New York City had kindergarten screening programs prior to the screening mandate. In New York City formalized kindergarten screening began principally after the passage of the screening statute.

- LCER staff found evidence of immunizations (99.8 percent) and health examinations or certificates (96.9 percent) in almost all files reviewed. No evidence of kindergarten screening completion was found in the following proportion of cases: language (3.6 percent), motor (4.1 percent), and cognitive (3.1 percent) development.

- Outside New York City, most districts conducted some or all of their screening in the spring using one or more commercially developed tests administered by specialists such as the school psychologist. Screening of non-English speaking students generally was a minor or nonexistent issue handled on a case-by-case basis.

- New York City currently uses a team of substitutes and/or retired teachers to conduct kindergarten screening in the fall. Almost all City districts switched from the DIAL to the Brigance after the 1981-82 school year perceiving the Brigance as less costly and cumbersome to administer and as valid and reliable as the DIAL.

- Screening of non-English speaking students was a major issue throughout New York City since districts had to screen students in 32 languages during the 1983-84 school year. Screening administrators complained about difficulties in coordinating language consultants' and children's schedules and problems in consultants relating to the children being screened. As of January 1984 1,568 kindergarten children (18.1 percent of those non-English speaking kindergarten children needing to be screened) were awaiting the services of language consultants.

- New York City districts in LCER's sample file reviews referred a greater proportion of students as possibly gifted and needing further observation than districts outside the City. This stems from the City's efforts to develop a large pool of possibly gifted students for consideration for gifted program admission. It also is a function of the use of numerical cutoffs by the City unlike other districts which relied largely on professional judgment for designating children's strength and weaknesses.

- Only 7.6 percent of the third graders and 4.7 percent of the eighth graders in LCER's sample schools taking the PEP and PCT scored below the minimum cutoff for screening under Section 3208(6) of the Education Law.

- About two-fifths of the districts outside the City automatically referred low PEP and PCT scorers to remedial programs rather than screening them as required under Chapter 53 for possible handicapping conditions.

- In 85 percent of the cases, LCER staff found that districts had appropriate remedial programs for PEP and PCT failures.

- The screening mandate had three principal impacts according to district personnel interviewed. It formalized existing screening procedures, focused attention on the needs of individual kindergarten students, and linked into already existing or newly created programs for developmentally delayed kindergarten pupils.

III FINANCES AND STATE EDUCATION DEPARTMENT ROLE

This chapter discusses the funding process for screening programs and statutory changes affecting financing. School district expenditures as reported to LCER staff are compared to screening aid received. Additionally, SED's oversight responsibilities and district opinions on the utility of possible SED roles are discussed.

Screening Aid

District screening programs are funded through a categorical aid formula based on adjusted average annual daily attendance. The formula base originally included kindergarten through grade three, but was broadened to kindergarten through grade six (K-6) for the 1981-82 school year. Almost $34 million in screening aid has been provided since the mandate's inception as delineated below:

School Year	New York City	Outside New York City	Total
1980-81	$ 1,653,484	$ 3,507,273	$ 5,160,757
1981-82	3,128,258	6,749,582	9,877,840
1982-83	3,089,779	6,462,758	9,552,537
1983-84	3,102,408	6,192,531	9,294,939
Total	$10,973,929	$22,912,144	$33,886,073

While the programmatic responsibilities of screening have remained constant since 1980, the corresponding financial guidelines of the program have not. For school years 1980-81 and 1981-82, formula aid could be used to cover screening costs incurred while screening students in kindergarten through grade 12 (K-12). In 1982, however, the Legislature restricted the use of screening aid to K-6 screening expenditures. This restriction was effective for the 1982-83 and 1983-84 school years. Beginning with the 1984-85 school year, State aid may again be used for K-12 screening.

LCER staff requested expenditure data from the districts for the 1983-84 school year for the 14 districts outside New York City and for New York City as a whole. Table 3 compares State aid received to screening costs for the districts in the LCER sample and New York City. As shown, there are large variations among the districts in the proportion of screening costs covered by State aid.

Ten of the 14 districts outside New York City reported spending more on K-6 screening than they received from the formula aid. When K-12 costs are compared no district reported spending less than the aid received. Overall screening aid averaged about 97 percent of K-6 screening expenses and 86 percent of K-12 screening costs. Screening aid covered 58 percent of K-12 costs outside New York City and 89 percent of New York City expenses.

Table 3

Percentage of District Screening Expenses
Covered by State Aid
1983-84 School Year

	Percent of District Screening Expenses Covered	
	K-6 Screening Costs	K-12 Screening Costs
New York City	99	89
Outside New York City		
Deer Park	—*	—*
Hamburg	72	50
Lowville	38	27
Niagara-Wheatfield	64	43
Plainview-Old Bethpage	66	45
Port Jervis	112	89
Port Washington	102	—*
Pulaski	45	35
Scarsdale	32	25
Schenectady	102	70
Syracuse	80	79
Watertown	93	71
West Irondequoit	206	94
Wynantskill	48	48
Average (Outside New York City)	79	58
Average (Total)	97	86

*Data not comparable.

Source: LCER data request to sample school districts, July 1984, and State Education Department, Division of Educational Finance.

State Education Department Role

Financial Oversight

The Division of Educational Finance is responsible for monitoring district screening expenditures. Within the Division, the Bureau of State Aided Programs has established a screening expenditure reporting system. Beginning with the 1982-83 school year school districts reported annually all K-6 and 7-12 screening expenditures separately. SED's review is limited to ensuring that screening expenditures are equal to or above district State aid.

SED advised school districts in November 1984 that some of their 1982-83 and/or 1983-84 screening aid will be recovered by the State if either of the following situations exist:

--The district has not submitted the required report on the expenditures for diagnostic screening; or

--The district's expenditure report indicates that the diagnostic screening expenditures for K-6 were less than the aid which was paid.

Districts were allowed to make corrective adjustments in their estimates for both school years (1982-83 and 1983-84) until December 31, 1984.

SED financial guidelines for district reporting of these screening expenditures are minimal. In November 1984, for example, New York City revised its original 1982-83 and 1983-84 screening expenditure reports by shifting in total $1.5 million in screening costs from grades seven to 12 to grades kindergarten through six. SED officials stated that the revised New York City reports as currently submitted would be accepted for State aid purposes. This shift justified $1.2 million of the screening aid received by New York City. SED has not audited the revised New York City screening expenditure reports for the 1982-83 and 1983-84 school years to assure that aid expenditures were consistent with legislative requirements.

Screening expenditures reported to LCER staff by seven districts outside the City varied substantially from those reported to SED. The range of these variations went from approximately $7,400 to $45,000. Districts contacted regarding these discrepancies reported that expenditure figures were calculated by different staff for the SED report and the LCER data request. To improve the accuracy of the expenditure reports, SED staff indicated that it will incorporate a diagnostic screening account in the 1984-85 fiscal report filed by school districts. Unless SED develops the necessary guidelines for use of the account code, however, SED will not be able to assure that screening aid is being spent appropriately.

Programmatic Oversight

SED programmatic oversight responsibilities with respect to the screening mandate are divided among several units. Regional Associates working out of SED's Office of Education of Children with Handicapping Conditions (OECHC) review school district programs for students with handicapping conditions every three years. Within this evaluation the screening program is assessed through a brief review of the district screening plan.

Three other units within SED perform an advisory role relative to screening. The Division of Educational Testing develops, reviews and analyzes the statewide standardized tests used by the districts and establishes the cutoff scores for PEP and PCT screening. This unit does not, however, review and/or analyze any screening instruments used by districts. The Gifted Education Unit, consisting of two professional staff, assists and monitors district programs for the gifted and requires districts to submit a summary gifted program plan annually for SED approval. For the 1984-85 gifted program plan, SED asked districts about the specific instruments used to test for possible giftedness. SED's Special Education Resource and Training Centers (SERTC) located in the various BOCES across the State generally provide technical assistance and training to districts for special education staff and programs.

LCER staff interviewed district personnel about their contact with SED specifically with respect to screening. Outside New York City most districts indicated some contact with OECHC when the mandate was first being implemented. However, they

indicated that contact with SED since then has been limited. The most utilized unit identified was SERTC. Some districts reviewed the screening instruments in SERTC's file for possible use. Within New York City, districts work directly with Board of Education staff on screening. Board of Education staff responsible for monitoring district compliance with the mandate expressed concerns that several of SED's screening policies including PEP and PCT screening cutoff scores and recovery of screening aid had not been communicated clearly to appropriate New York City personnel.

District Opinion of SED Role/Responsibilities

Districts commented on whether SED should perform specific regulatory and/or program assistance roles relative to the screening mandate. Most districts (both within and outside New York City) responded that SED should serve as an information clearinghouse for screening tests used by other districts. Most districts also saw reviewing the validity and reliability of district or commercially developed tests as an appropriate SED responsibility.

While the majority of districts believed SED should develop or recommend specific screening tests, only three districts (all within New York City) thought SED should be involved in mandating one or a choice of several screening tests from which districts must select. Most districts felt that they were in a better position to determine their own needs and doubted that SED would be sensitive to local needs in developing such a list.

Chapter Summary

- Beginning with the 1980-81 school year the State has provided almost $34 million in screening aid. For the 1983-84 school year the sample districts reported that the screening aid averaged 86 percent of their total screening costs.

- Few guidelines accompanied the SED screening expenditure reporting system allowing New York City to shift screening costs for the 1982-83 and 1983-84 school years from grades seven through 12 to kindergarten to grade six. This shift justified $1.2 million in screening aid and was not questioned by SED.

- While most districts stated that SED should serve as an information clearinghouse for screening tests, few thought SED should mandate which tests districts must use in their screening programs.

FOOTNOTES

I. Program Background and Legislative Intent

1. Sharon R. Stangler, Cathee J. Huber, and Donald K. Routh, Screening Growth and Development of Preschool Children: A Guide for Test Selection (New York: McGraw Hill, 1980).
2. Ibid., p. 34.
3. See Section 2164 of the Public Health Law and Sections 903, 904, and 905 of the Education Law.
4. 8 NYCRR 117.3(c)(3).
5. 8 NYCRR 117.2(e).
6. 8 NYCRR 117.3(a) and State Education Department, Screening in New York State (Albany: February 1982) p. 5.
7. 8 NYCRR 117.3(b) (1)(2)(3).
8. 8 NYCRR 117.3(d), (e), (f).
9. Chapter 53, Laws of 1980, Section 21.
10. Chapter 53, Laws of 1981, Section 34.
11. This chapter rewrote Section 3602 (21) of the Education Law.
12. Chapter 53, Laws of 1984, Section 38.

APPENDIX A

LIST OF INTERVIEWS AND CONTACTS

State Education Department

Office of the Executive Deputy Commissioner - Executive Deputy Commissioner.

Office of Administrative Services - Associate Commissioner for Administrative Services; Budget Analyst, Bureau of Budget Coordination.

Office of Elementary, Secondary and Continuing Education - Deputy Commissioner; Executive Assistant; Coordinator of State Aid Information; Director, Division of Educational Testing; Chief, Bureau of State Aided Programs; Supervisor, Division of Program Development and Director, Division of Program Monitoring, (New York City Office), Office for Education of Children with Handicapping Conditions; Director, Education of Gifted Unit; Director, Division of Educational Finance; Chief, Bureau of Child Development and Parent Education.

Special Education Training and Resource Center, Albany-Schenectady-Schoharie Board of Cooperative Educational Services - Director.

Local School Districts

Deer Park - Director of Pupil Personnel Services; Remedial Reading Specialist.

Hamburg - Assistant Superintendent for Instruction; PSEN Reading Teacher and Principal, Boston Valley School.

Lowville - Superintendent; and Principal, Lowville Junior and Senior High School.

New York City Board of Education - Acting Executive Director, Division of Pupil Personnel Services; Assistant Director and Coordinator of Field Services, Student Health and Screening Services; Audit Managers, Office of Auditor General; Staff Attorney, Office of Legal Services; Assistant Director, Gifted and Talented Office; Director, Early Childhood Education Office.

Bronx 11 - Screening Administrator.

Brooklyn 18 - Screening Administrator; Education Administrator.

Brooklyn 21 - Screening Administrator.

Manhattan 1 - Director of Pupil Personnel Services; Director of Funded Services.

Queens 26 - Screening Administrator.

Staten Island 31 - Screening Administrator; Deputy Superintendent.

Niagara-Wheatfield - Director of Special Programs; School Psychologist(2).

North Colonie - Director of Pupil Personnel Services.

Plainview-Old Bethpage - Superintendent; Director of Pupil Services; Assistant Superintendent for Curriculum and Instruction; Principal, Old Bethpage School.

Port Jervis - Assistant Superintendent for Instruction.

Port Washington - Assistant Superintendent for Instruction; Director of Pupil Personnel Services.

Pulaski - Superintendent.

Scarsdale - Director of Pupil Services.

Schenectady - Assistant Superintendent; Psychologist.

Syracuse - Director and Research Assistant, Research and Evaluation Unit.

Watertown - Superintendent; Reading Coordinator.

West Irondequoit - Director of Pupil Personnel Services; Director of Special Education; Principal, Colebrook School.

Wynantskill - Assistant Superintendent; School Psychologist.

APPENDIX B

METHODOLOGY

To assess the extent and manner of school district compliance with the screening mandate, LCER staff selected a sample of 20 school districts based on a geographic spread and the sevenfold classification of school districts used by the State Education Department.

Using the Fall 1982 kindergarten enrollment by type of school district (Table B-1), LCER staff selected 20 districts based upon the percent of kindergarten enrollment in each district classification. A random sample was drawn based upon each classification's share of the State kindergarten enrollment. Oversamples were added for four districts to assure that at least 20 kindergarten records would be reviewed in each district. The sample is not designed to permit inferences of statistical significance, but does reflect a cross section of districts statewide.

Table B-1

New York State Kindergarten Enrollment
Fall 1982

District Number*	District Category	Half Day Kindergarten		Full Day Kindergarten		Total Kindergarten	
		Students	Percent	Students	Percent	Students	Percent
1	New York City	43,928	33.8	8,509	23.5	52,437	31.5
5	Large City	6,449	5.0	3,044	8.4	9,493	5.7
7	Medium City	3,989	3.1	18	.1	4,007	2.4
49	Small City	11,953	9.2	1,676	4.6	13,629	8.2
271	Large Central	52,645	40.5	8,740	24.1	61,385	36.9
187	Large Rural	8,122	6.2	9,610	26.5	17,732	10.7
191	Small Rural	2,933	2.3	4,650	12.8	7,583	4.6
711	Total	130,019	100.1	36,247	100.0	166,266	100.0

*Includes only school districts with kindergarten programs.

Source: *Public Schools Enrollment and Staff, New York State 1982-83. The State Education Department; Information Center on Education: Albany.*
Community Type Classifications of Public School Districts. The State Education Department; Bureau of Elementary and Secondary Testing Programs: Albany.

Beyond screening of kindergarten and other new entrants, the statute requires that children scoring below specified scores on the third grade reading and mathematics tests for the Pupil Evaluation Program (PEP) and the Preliminary Competency Tests (PCT) in reading and writing be screened. Lacking a central data base on the extent of that

population by district, LCER staff reviewed a maximum of ten records of children in each district scoring below the PEP and PCT levels for screening. As Chapter II indicates, relatively few children scored below the statutorily specified scores. Table B-2 presents the numbers sampled by district for each category.

Within each district, LCER staff randomly chose two schools serving kindergarten and third grade students for PEP low scorers (except for districts with only one elementary school) and an intermediate school for PCT low scorers. New 1983-84 kindergarten entrants, low scorers on the May 1983 PEP tests, and low scores on the most recently administered PCTs (time of administration varied among the districts) were used for sample selection. The number of records reviewed for each kindergarten was based on its share of the enrollment of the two schools sampled.

In each district, LCER staff reviewed the health and screening records of each child in the sample, and any information on subsequent action taken based upon the screening results. Appropriate district staff were interviewed on the operation and administration of their screening program. Each district also completed a data request about its implementation of the screening mandate. Field work was conducted in October and November of 1984 after a test field visit was completed in the North Colonie School District.

Table B-2

LCER Screening Sample

District	Kindergarten Random Sample	Kindergarten Over Sample	Third Grade[a] PEP Sample	Eighth Grade[b] PCT Sample	District Sample
New York City					
Bronx 11	21	0	5	5	31
Brooklyn 18	21	0	5	5	31
Brooklyn 21	21	0	3	7	31
Manhattan 1	21	0	5	5	31
Queens 26	21	0	3	0	24
Staten Island 31	21	0	5	5	31
Large City					
Syracuse	23	0	5	5	33
Medium City					
Schenectady	10	10	0	5	25
Small City					
Port Jervis	16	4	0	2	22
Watertown	17	4	1	9	31
Large Central					
Deer Park	21	0	5	5	31
Hamburg	21	0	0	2	23
Niagara-Wheatfield	22	0	5	5	32
Plainview-Old Bethpage	21	0	7	3	31
Port Washington	21	0	3	6	30
Scarsdale	21	0	1	0	22
West Irondequoit	21	0	3	2	26
Large Rural					
Lowville	21	0	2	5	28
Pulaski	21	0	0	0	21
Small Rural					
Wynantskill	18	2	1	0	21
Total	400	20	59	76	555

[a]Third grade students who scored below specified scores on the reading and/or mathematics tests administered under the Pupil Evaluation Program in May 1983.
[b]Eighth grade students who scored below specified scores on the most recently administered Preliminary Competency Tests in Reading and Writing.

Source: LCER staff; Community Type Classifications of Public School Districts. State Education Department: Information Center on Education; Albany.

Appendix C

Kindergarten Screening Results
LCER Sample

	Number of Students Sampled	No Screening Reports Filed	No Referral Required		Referral Required				
						Programmatic Referral			
			No Need For Teacher Observation	Need For Teacher Observation	Possibly Gifted	ESL and Developmentally Delayed	Need For Future Evaluation	COH Referral	Miscellaneous and Other
New York City									
Brooklyn #18	21	0	6	8	7	0	0	0	0
Brooklyn #21	21	3	5	11	1	1	0	0	0
Bronx #11	21	0	4	10	7	0	0	0	0
Manhattan #1	21	0	3	16	1	0	0	1	0
Staten Island #31	21	0	5	1	15	0	0	0	0
Queens #26	21	0	5	1	15	0	0	0	0
Subtotal	126	3	28	47	46	1	0	1	0
Outside New York City									
Deer Park	21	0	19	1	0	1	0	0	0
Hamburg	21	11	5	3	0	2	0	0	0
Lowville	21	0	12	4	1	2	0	0	2
Niagara-Wheatfield	22	0	16	6	0	0	0	0	0
Plainview-Old Bethpage	21	1	13	6	1	0	0	0	0
Port Jervis	20	0	19	1	0	0	0	0	0
Port Washington	21	0	11	2	0	4	2	1	1
Pulaski	21	21*	0	0	0	0	0	0	0
Scarsdale	21	0	6	9	3	2	0	1	0
Schenectady	20	0	13	2	0	0	4	0	1
Syracuse	23	0	8	12	2	0	0	1	0
Watertown	21	0	18	0	0	3	0	0	0
West Irondequoit	21	1	12	2	0	1	4	0	1
Wynantskill	20	3*	13	3	0	0	0	0	1
Subtotal	294	37	165	51	7	15	10	3	6
Total	420	40	193	98	53	16	10	4	6

* Indirect evidence of screenings being completed provided to LCER staff.

Source: LCER review of kindergarten screening results, October and November 1984.

APPENDIX D

AGENCY RESPONSE

State Education Department

Page numbers of the preliminary report differ from those in the printed report. Thus, page numbers mentioned in the agency response have been changed by LCER staff to correspond to this final report.

THE BICENTENNIAL OF THE BOARD OF REGENTS AND THE UNIVERSITY OF THE STATE OF NEW YORK

EXECUTIVE DEPUTY COMMISSIONER OF EDUCATION
THE NEW YORK STATE EDUCATION DEPARTMENT
ALBANY, NEW YORK 12234

March 12, 1985

Mr. Bernard P. Geizer
Director
Legislative Commission on Expenditure
Review
111 Washington Avenue
Albany, New York 12210-2277

Dear Mr. Geizer:

Thank you for your February 13th letter to Commissioner Ambach transmitting LCER's preliminary and confidential draft of the program audit, *"State Education Department Diagnostic Screening Program." The State Education Department's comments to the draft program audit are enclosed.

I wish to thank you for the opportunity to provide comments on the draft program audit report. We commend the auditors for the professional and comprehensive report on the diagnostic screening program.

Sincerely,

Robert J. Maurer

Enclosure

*Audit name changed to "Screening of Public School Children."

State Education Department's Response to LCER's Program Audit of the *"State Education Department Diagnostic Screening Program"

1. LCER Recommendation: SED should consider developing an inventory of screening instruments used by various school districts.

   SED Response: Agreed. During 1985, we will develop such an inventory of screening instruments used by various school districts. Also, inventories of screening instruments commonly used to identify children with handicapping conditions will be collected on a regional basis and housed at the Special Education Resource and Training Centers (SETRC) located at various BOCES across the State. This procedure will provide districts with greater access to this information.

2. LCER Recommendation: SED should develop detailed guidelines to assist districts in accurately reporting their screening expenditures.

   SED Response: The State Education Department will amend the Annual Financial Report for 1984-85 to include account codes for diagnostic screening expenditures. We will also revise the aid report form to include more detailed instructions and guidelines.

3. LCER Recommendation: SED should audit the New York City revised screening expenditure reports for the 1982-83 and 1983-84 school years to assure that State aid dollars were spent appropriately.

   SED Response: We do not agree with this recommendation. The number of field reviews performed by the Office of Educational Finance and Management are limited and, therefore, must be focused on those areas in greatest need of review. With respect to the diagnostic screening program, our program offices, through their review and monitoring procedures, believe that the screening services are being accomplished in New York City. In the area of screening students for handicapping conditions, our staff continually monitors the performance of the New York City Board of Education in this regard. Based upon our findings from program reviews, we cannot justify a separate fiscal audit of the New York City diagnostic screening program.

*Audit name changed to "Screening of Public School Children."

Additional Comments on the LCER Audit

The State Education Department is essentially in agreement with the LCER audit report. We commend the auditors for carrying out a professional and comprehensive program audit of the diagnostic screening program. We would, however, request that the audit report be amended in two areas:

* 1. On Page S-1, the fourth paragraph does not mention that the State Education Department at the time of the implementation of the screening regulations, developed a technical assistance manual, Screening in New York State (August 1980), which was disseminated to all school districts. This publication was amended in February 1982 and again distributed to all school districts. This is, in our view, a major effort and does not support the statement that we have left the implementation to the initiative of the districts. On Page S-3, under the paragraph on "SED Program Role," again the manual, which was a significant effort, is not mentioned. We have attached copies of these publications to this response.

2. On Page 17, under the paragraph on Programmatic Oversight, the statement regarding the Office for Education of Children with Handicapping Conditions (OECHC) monitoring implies that we do not monitor very carefully the screening mandate. In fact, we do look at every district plan and we also look for evidence of screening referrals in our reviews of student files. This should not be viewed as only a "brief review," but instead as that which is necessary to monitor the program. Our procedures include the following:

    1. A review of the districts' procedures for screening to make certain that those procedures exist and that they are consistent with the requirements of the regulations.

    2. Selective follow-up to make sure that those students who should be referred to the Committee on the Handicapped (COH) as a result of the screening are actually referred.

*Audit revised to reflect statement.

PROGRAM AUDITS* OF THE LEGISLATIVE COMMISSION ON EXPENDITURE REVIEW

DOT Real Estate Program, April 15, 1976.

Solid Waste Management in New York State, May 20, 1976.**

Boards of Cooperative Educational Services Programs, June 28, 1976.**

Boards of Cooperative Educational Services Finances, June 30, 1976.**

Workmen's Compensation Program for State Employees, July 30, 1976.**

Public Pension Fund Regulation, October 29, 1976.**

Computers in New York State Government, December 1, 1976.**

Health Planning in New York State, January 3, 1977.**

The Optional Service Charge Law, March 11, 1977.

Immunization of Children, May 27, 1977.

State Parks and Recreation Program, October 11, 1977.

State Travel Costs, December 15, 1977.

Venereal Disease Control, December 16, 1977.**

State Environmental Permits, December 19, 1977.

Pupil Transportation Programs, January 30, 1978.**

Housing Maintenance Code Enforcement in New York City, March 31, 1978.

Vacation Credit Exchange, June 16, 1978.

Adirondack Park Planning and Regulation, July 31, 1978.

School Food Programs, August 7, 1978.

SUNY Developing and Nontraditional Colleges, September 26, 1978.

Newborn Metabolic Screening Program, October 31, 1978.

Fiscal Effect of State School Mandates, December 20, 1978.

School District Budget Voting and Contingency Budgeting, December 28, 1978.

State Aid for Operating Sewage Treatment Plants, April 16, 1979.**

Crime Victims Compensation Program, April 23, 1979.

Drinking Driver Program, May 15, 1979.

Unemployment Insurance for State Employees, July 20, 1979.

Work Programs for Welfare Recipients, August 3, 1979.

CETA Programs in New York State, August 24, 1979.

Parole Resource Centers Program *(Research Report),* August 31, 1979.

Local Government Use of State Contracts, October 15, 1979.

Use of State Adult Psychiatric Centers, February 29, 1980.

National Guard Strength and Armories, March 17, 1980.

School District Committees on the Handicapped, April 15, 1980.

Delinquency Prevention and Youth Development Programs, May 2, 1980.

Energy Use in State Facilities, June 11, 1980.

Occupational Education in Secondary Schools, July 6, 1980.**

Use of State Developmental Centers, November 6, 1980.

Energy Research and Development Programs, December 24, 1980.

State Subsidized Low Rent Public Housing, December 31, 1980.

Taxpayer Services Program, March 9, 1981.

Title XX Social Services, March 13, 1981.**

State Prison Inmate Health Services, June 19, 1981.**

Runaway and Homeless Youth, July 15, 1981.

State Mandates to Counties *(Research Report),* August 14, 1981.

Control of the State Telephone System, August 21, 1981.

Hospital and Nursing Homes Management Fund, October 5, 1981.

Methadone Program, December 21, 1981.

Regulation of Automotive Repair Shops, December 24, 1981.

School District Cash Management, December 29, 1981.

Pupils With Special Educational Needs, April 30, 1982.**

State Division of Probation Programs, June 10, 1982.

State Physician Shortage-Maldistribution Programs, July 16, 1982.**

Commission on Cable Television, September 15, 1982.

Management of Youth Rehabilitation Programs, October 29, 1982.

Impact of Youth Rehabilitation Programs *(Research Report),* October 29, 1982.

Council on the Arts Application Review and Funding, November 29, 1982.

The Weatherization Assistance Program, December 6, 1982.

SUNY Hospitals, February 28, 1983.

Dormitory Vandalism on SUNY Campuses, March 24, 1983.

Procurement of Consulting Services *(Memorandum Report),* March 31, 1983.**

Processing of Human Rights Cases, April 23, 1983.

Contractual Social Services Training Programs, June 3, 1983.

Comparative Resident and Non-Resident Tuitions, Enrollments and Policies in the Fifty States *(Memorandum Report),* June 7, 1983.

State Operated Ski Centers, September 30, 1983.

Mental Health Community Support System, October 28, 1983.

Education of Children Under State Care or Custody, November 30, 1983.

State Insurance Fund, December 9, 1983.

State Alcoholism Treatment Centers, December 14, 1983.

Correctional Officer Training Program *(Memorandum Report),* February 15, 1984.

Neighborhood Preservation Program, March 1, 1984.

Unemployment Insurance Benefit Payment Control *(Memorandum Report),* March 9, 1984.

Family Court Orders for Handicapped Children, March 9, 1984.**

Bridge Rehabilitation and Replacement, April 9, 1984.

Weatherization Assistance Program Follow-Up *(Memorandum Report),* April 20, 1984.

The Mental Health Information Services, May 21, 1984.

Disaster Preparedness Programs, June 15, 1984.

State Prison Release Programs, June 30, 1984.

Home Insulation and Energy Conservation Program *(Memorandum Report),* September 21, 1984.

Power Authority of the State of New York, November 30, 1984.

State Equine Drug Testing and Research *(Memorandum Report),* December 31, 1984.

Local Social Services Administrative Costs, January 31, 1985.

OMRDD Information System Needs, March 15, 1985.

Screening of Public School Children, April 12, 1985.

* Excludes 45 reports printed 1971 through 1975. A list of these publications may be obtained by request of the Commission.

** Out of print; loan copies available upon request.

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